

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000496382

**Entity Name:** I.N.C. RB 3 LLC

**Current Principal Place of Business:**

4000 HOLLYWOOD BLVD  
SUITE 730N  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

P.O BOX 630306  
MIAMI, FL 33163 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

I.N.C. CAPITAL GROUP LLC  
4000 HOLLYWOOD BLVD  
SUITE 730N  
HOLLYWOOD, FL 33021 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

|                 |                 |                 |                 |
|-----------------|-----------------|-----------------|-----------------|
| Title           | MGR             | Title           | MGR             |
| Name            | COHEN, MEIR     | Name            | NEW, AVRAHOM    |
| Address         | P.O. BOX 630306 | Address         | P.O. BOX 630306 |
| City-State-Zip: | MIAMI FL 33163  | City-State-Zip: | MIAMI FL 33163  |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NEW , AVRAHOM

**MGR**

**04/28/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date